

April - May 1999



Not Just Once

The Bimonthly Newsletter of HCFA's National Medicare Mammography Campaign

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Multi-City Mammography Pilot Projects

Welcome!

This issue of **Not Just Once** includes a number of useful articles with information aimed at helping your efforts to increase mammography screening rates for Medicare women 65 and older. We applaud all of the local efforts that have been featured in the newsletter and hope that others have been able to learn from these experiences. We also look forward to hearing from the rest of you and highlighting your activities as well.

We would like to encourage you to use various opportunities throughout the year to get the word out about the importance of routine mammography screening for older women. One such opportunity is Mother's Day, which many of you are already planning for. This is a gentle reminder to order mammography material through the CIS now to be sure you receive them on time.

Additionally, featured in this issue, is information about a variety of events and activities emphasizing healthy aging. This is another opportunity to deliver our message to women to get a mammogram "not just once, but for a lifetime." in order to maintain their health.

We welcome your feedback and look forward to hearing about your efforts!

Sincerely,

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Ta Budetti

Deputy Regional Administrator HCFA, Region V, Chicago

Sandy Kappert

Director, Division of Health Promotion HCFA's Center for Beneficiary Services

FDA's Mammography Quality Service Act

As of October 1, 1994, all mammography facilities in the U.S. (except those of the Department of Veterans Affairs) were required to be certified by the U.S. Food and Drug Administration (FDA) as meeting mammography quality in order to lawfully continue to perform mammography. This requirement is a result of legislation enacted by Congress and requires national, quality and safety standards for mammography facilities. The goal of this legislation, titled the Mammography Quality Standards Act of 1992 (MQSA), is to assure that mammography is safe and reliable and to allow the detection of breast cancer in its earliest, most treatable stages. There are now more than 10,000 FDA-certified facilities in the U.S.

MQSA Requirements

The key features of MQSA are:

- To operate lawfully, a mammography facility must be certified by FDA as providing quality mammography services.
- For a facility to be certified, it must be accredited by a federally-approved private nonprofit or state accreditation body. FDA has approved the American College of Radiology (ACR) and the States of Arkansas, California, and Iowa as accreditation bodies.
- To be accredited, the facility must apply to an FDA-approved accreditation body, undergo periodic review of its clinical images; have an annual survey by a medical physicist; and meet federally-developed quality standards for personnel qualifications, equipment quality assurance programs, and record keeping and reporting.
- The facility must also undergo an annual inspection conducted by federally-trained and certified federal or state personnel. Inspections began in January 1995. All facilities have had their first inspection, and more than half have had their second.

Who Must Meet MQSA Requirements?

All mammography facilities that produce, process, or interpret mammograms. (Exceptions are facilities that are under the Department of Veterans Affairs, which is developing its own quality mammography program similar to MQSA.)
Requirements cover personnel, equipment, radiation dose, quality assurance programs, and record keeping and reporting.

Accreditation bodies (state or private nonprofit organizations).

The following personnel involved in the production, processing, or interpretation of mammograms:

- Radiologic technologists who perform mammographic procedures
- Physicians who interpret mammographic images
- Medical physicists who survey mammography equipment

FDA Implementation of MQSA

FDA is responsible for implementing MQSA. This entails certifying all U.S. mammography facilities that have received accreditation by an approved accreditation body, training and certifying federal and state inspectors, inspecting all mammography facilities annually, overseeing facility efforts to correct deficiencies, and educating mammography facilities and the public about quality mammography. Uncertified mammography facilities that continue to operate are in violation of the law and subject to injunction and civil money penalties.

Under authority provided by Congress, FDA issued interim regulations that describe the facility quality standards and the standards to be met by the accrediting bodies. These interim standards were published in the December 21, 1993 Federal Register and became effective on October 1, 1994. Other Federal Register notices that have been published are listed at http://www.fda.gov/cdrh/frdmqrp.html.

MQSA mandated the formation of the National Mammography Quality Assurance Advisory Committee, which has been meeting quarterly since its first meeting in February 1994. It has been focusing on various issues, particularly the development of final standards to replace the interim standards; the effects of MQSA on access to mammography services; the availability of medical physicists; and the cost benefit of compliance, and the possibility of developing standards for interventional mammography procedures. FDA anticipates that the final standards will be published in late 1999, but they will not become effective until at least a year after publication.

For additional information:

FDA will issue periodic announcements regarding MQSA requirements and implementation strategies in its newsletter, *Mammography Matters* and on their home page. To receive copies of the newsletter, write to:

MQSA c/o SciComm, Inc. P.O. Box 30224 Bethesda, MD 20924-9998 Fax: 301-986-8015

Educational Events

APR L MAY

4/16 - 4/17/99

BREAST CANCER IN THE AFRICAN-AMERICAN WOMAN

A multi-disciplinary group of experts will address the issues surrounding breast cancer among the African American population at this national conference sponsored by the Y-ME National Breast Cancer Organization. Location: Holiday Inn City Centre, Chicago, IL. For more information, call: 800-221-2141.

4/30 - 5/2/99

ANNUAL SOCIETY OF BREAST CANCER DISEASE 1999 ANNUAL MEETING

This year's event is entitled "Breast Cancer: Misinformation, Future Directions, and Customized Care." The meeting will be held at the Hyatt Regency Hotel in New Orleans during the New Orleans azz and Heritage Festival. Attendees are encouraged to book their hotel reservations early due to the popularity of the Festival. For more information, call: 800-233-1234

4/29 - 5/1/99

NATIONAL CONSORTIUM OF BREAST CENTERS
1999 BREAST CANCER DEVELOPMENT CONFERENCE
The National Consortium of Breast Centers is
holding its National Breast Cancer Development
Conference April 29, 30, and May 1 at the MGM
Grand Hotel in Las Vegas, NV. The conference
is free to consortium members, and \$175 for
non-members. A pre-conference program,
"Compliance with the Final Federal MQSA
Regulations," will be offered April 28. Category
I continuing education credits will be available
for physicians and radiological technologists.
For more information, call the National Consortium of Breast Centers at 219-267-8058 or
visit its website, www.breastcare.org.

JULY

7/26 - 7/31/99

WORLD CONFERENCE ON BREAST CANCER
This multidisciplinary conference will host participants from over 50 countries. The event seeks to educate and disseminate information on all aspects of breast cancer. The main objective of this meeting is to strengthen inter-

national breast cancer networks in the effort to eradicate this disease. Location: Ottawa, Canada. For more information, call: 613-549-1118.

SEPTEMBER

9/8 - 9/10/99

MEETING THE CHALLENGES OF COMPREHENSIVE CANCER CONTROL

The Centers for Disease Control and Prevention (CDC) will be hosting the 1999 cancer conference, "Meeting the Challenges of Comprehensive Cancer Conrol" September 8-10, 1999, at the Atlanta Marriott Marquis in Atlanta, GA. Important partners in the collaborative meeting include the American Cancer Society, the Association of State and Territorial Chronic Disease Program Directors, the Association of State and Territorial Directors of Health Promotion and Public Health Education, and the National Cancer Institute. Continuing education credits are available. For more information, call: 404-521-0000.

World Health Day — April 7, 1999 Healthy Aging



"Healthy Aging" has been designated by the World Health Organization (WHO) as the topic of World Health Day 1999. This initiative focuses on the present and future challenges that arise when the world is faced with a growing population of older persons. Increased longevity around the world will affect every aspect of our society.

In the United States, the theme "Healthy Again, Healthy Living — Start Now!" was selected by the American Association for World Health (AAWH) and its World Health Day Advisory Committee of experts. Because the international observance of World Health Day increases media attention to the theme it promotes, World Health Day 1999 provides an ideal opportunity to educate the public about healthy behaviors and diagnostic preventative services, such as mammography screening, that will allow them to be healthier and feel better as they age.

April 7 is World Health Day. However, you are encouraged to plan observances and **Healthy Aging** activities throughout the year.

What is Healthy Aging?

As people age, health is likely one of the most important aspect of their quality of life. While many people think of healthy aging as preventing, postponing or treating diseases, in reality it involves much more. The concept of healthy aging considers the health of the whole person their physical, psychological, social and spiritual health and not just freedom from disease. Healthy aging consists of the interaction of a wide range of factors, such as:

- Taking steps to maintain or enhance one's physical and mental functioning, including adopting healthy behaviors
- Being active, productive and involved in society
- Maintaining one's independence while living in a stable social environment
- · Maintaining meaningful personal relationships.

The recent world attention to this issue has been fueled by two major factors. First, the population is aging at a rapid rate, prompting concern about a wide range of social issues that will result from dramatic changes in the world population.

The second factor is the growing understanding that a majority of people can reasonably expect a healthy and productive old age. The remarkable results of new research have debunked many of the myths about aging, including the notion that disease and loss of functioning are inevitable and that our genes predetermine our pattern of aging. Instead, studies have found that lifestyle and social factors are sometimes more significant than our genes in determining how successfully we will age.



International Year of Older Persons

The United Nations (UN) has proclaimed October 1, 1998 through December 31, 1999 as the International Year of Older Persons (IYOP). The year is intended to raise international awareness of the growing numbers of older people around the world and to draw attention to the major impact the shift in population age will mean to societies.

The UN selected the theme "Towards a Society for All Ages" to encourage dialogue about older people and aging issues. The aging of populations raises two major challenges—the first is to promote lifelong individual development so that individuals reach old age with life skills, vocational skills, good health and strong family and social networks. The second is to create an enabling environment in which individuals of all ages can participate actively and receive care and support when needed.

The United States Committee for the celebration of the International Year of Older Persons 1999 has been formed. In addition, a federal committee comprised of agencies government-wide is sponsoring a number of activities during the IYOP. In uly, 1999, a national conference will be convened to examine the role of the federal government in planning for longevity. The Administration on Aging has the lead on IYOP for the federal government, and has created a website proving information and resources (http://www.aoa.gov/international).

HCFA's Healthy Aging Project

By Diana Ayres
HCFA's Office of Clinical Standards
and Quality

The Health Care Financing Administration has developed a Healthy Aging Project to promote health and prevent functional decline in the senior population. Two reports synthesizing the evidence on health promotion and disease prevention interventions will be produced in 1999. The first report will synthesize the evidence on ways to promote the use of Medicare-covered clinical preventative services, such as mammography, Pap tests, colorectal screening, and influenza and pnuemococcal vaccinations by providers and beneficiaries.

The first evidence report will be available Spring of 1999. The second evidence report, which will address behavioral risk factor reduction interventions and self-care for disease management, will be available in Fall of 1999.

For additional information HCFA's Healthy Aging Project, please contact Diana Ayers in HCFA's Office of Clinical Standards and Quality at (410) 786-7203 or via email at: dayers hcfa.gov

HCFA's Regional Mammography Coordinators

The only thing we don't do are windows!

HCFA's regional mammography coordinators are at your service! Give us a call and we will be glad to put HCFA's road-tested resources to work for you. Let us tell you some more about using CIS's Consumer Health Profiles to help you better connect with beneficiaries in your area. We can also provide you with HCFA's

1999 mammography outreach materials, as well as a wide variety of other resources. Call your regional mammography coordinator today and see what we can do for you!



Call Us Today

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PRO SPOTLIGHT

Michigan Peer Review Organization

Michigan Peer Review Organization to Assist Michigan Public Health Institute With CDC's Breast and Cervical Cancer Control Program

The Michigan Public Health Institute has awarded a contract to the Michigan Peer Review Organization (MPRO) to assist with a data audit and quality improvement activities associated with the Michigan Department of Community Health's (MDCH) participation in the Breast and Cervical Cancer Control Program. This program is funded through the Centers for Disease Control and Prevention's National Breast and Cervical Cancer Early Detection Program.

As we reported in the December 1998-January 1999 issues of **Not Just Once**, the CDC Breast and Cervical program provides funds for community-based screening and educational services for low-income women and educational opportunities for health professionals to improve detection and treatment skills. The Cancer Prevention and Control Section of MDCH's Division of Chronic Disease and Injury Control administers the Michigan Breast and Cervical Cancer Control Program. As of 1998, 50,000 women are enrolled in the program, and 20,000 are screened annually for these diseases. Services are provided throughout the state by a number of coordinating agencies with about 210 clinical sub-sites.

Under the \$160,000 project, MPRO will conduct the annual audit of the MDCH Breast and Cervical Cancer Control Program's database, assist coordinating agencies in recognizing areas for potential improvement, and facilitate the development and implementation of improvement plans with coordinating agencies.

Every other month, we offer the opportunity for regional offices and PROs to share information about activities that are underway in their communities. We encourage you to email submissions for our next issue of **Not Just Once** to rklugman hcfa.gov. We'll be sure to include your update.

It's Almost Mother's Day Have you ordered HCFA's Medicare Mammography Materials



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As you may know, HCFA has been working in partnership with the National Cancer Institute (NCI) to develop a joint health promotion campaign for our Medicare mammography efforts. HCFA has adopted NCI's slogan "Mammograms: Not ust Once, But For A Lifetime" to assure a consistent message from the Department of Health and Human Services. NCI has worked to customize their breast cancer health promotion materials for our Medicare audience, and include details about the new annual mammography benefit, the Medicare 1-800 number, and HCFA's logo. The materials have been created in large print, and all are available in Spanish language. These materials are all availa le free of charge to HCFA's mammography partners

HCFA has worked with NCI to develop a system where our partners can fax in an order form for these materials directly through NCI's Cancer Information Service (CIS). A copy of this order form is attached below. Rather than ordering in bulk, we request that you order on an as needed basis, limiting your order to 5,000 per item. This new system will reduce unnecessary waste, and will help ensure a more systematic process of dissemination. Typically, orders will be filled within one to two weeks. Please fa the order form elow directly to the Cancer nformation Service at

3 1 33 9

National Cancer Institute/Health Care Financing Administration Mammography Education and Promotion Materials





	ORDER FORM	
Name:		
Title:		
Organization:		
Address:		
City:		Zip Code:
Phone:		

Title & Contents Description	Language	Publication Number	Size	Quantity
Mammograms Not Just Once, But For A Lifetime Large-print, easy to read brochure that defines mammography, describes who needs this important examination, and Medicare information.	English	H496	8½ x 11	(maximum order 5000)
Spanish Version — See above.	Spanish	H497	8½ x 11	(maximum order 5000)
Older Woman Poster Includes slogan with Medicare information. A poster featuring an older woman, available for display in health care settings (minimum order: 20)	English	G500	11 x 17	(maximum order 5000)
Spanish Version — See above.	Spanish	G501	11 x 17	(maximum order 5000)
Older Woman Bookmark Includes slogan with Medicare information. Bookmark features an older woman with facts in breast cancer, mammography, and Medicare coverage.	English	Z498	2 x 8	(maximum order 5000)
Spanish Version — See above.	Spanish	Z499	2 x 8	(maximum order 5000)
Pap Tests: A healthy habit for life Large-print, easy-to-read brochure that defines Pap tests, describes who needs this screening test, and includes Medicare information.	English	H345	8½ x 11	(maximum order 5000)

The Multi City Mammography Pilot Pro ect "Community is the Key"

By im Coan, HCFA's Center for Beneficiary Services and Project Officer for HCFA's Multi City Mammography Pilot Projects

The label "Multi-City Mammography Pilot Project" really does little to describe a total community approach to increasing mammogram utilization among African-American and Hispanic Medicare beneficiaries in six U.S. cities. Yet, despite this misnomer, these six communities have responded to the challenge and have accepted ownership of their individual projects in an effort to help spread the word that the risk of breast cancer increases with age and that women of color often do not present for screening until a problem has developed. Advocates, cancer control programs, national cancer organizations, churches, individuals, and others in Atlanta, Philadelphia, Cleveland, Chicago, San Antonio, and Los Angeles have come together in a concerted effort to maximize resources and present factual and consistent messages about breast cancer and screening. What makes this project unique is that the community "owns" it.

When I say the community owns the project I mean just that. Members from the community were brought together by the State Peer Review Organization (PROs) to discuss the reasons why Black and Hispanic Medicare beneficiaries were not getting screening mammograms as frequently as their White counterparts. There were, of course, many reasons offered. What was discovered is that everyone knew the reason but no one knew all of the reasons. However, by coming together it became all too clear that not all women of color have the same reasons for not receiving a mammogram. This became the foundation for developing interventions to influence these women to get annual screening mammograms. Each community began to identify approaches that were customized to suit the specific requirements of the audience they would address.

In some ways the actual intervention is not as important as the process used to identify the needs of the community. This is not to suggest that any intervention would work but rather that it was the community itself that defined the intervention best suited to its own identified needs. Many existing, promising interventions were identified during the discovery period. Some were modified to bring focus on specific barriers of culture, poverty, and/or fear. The result represented ownership of not only the problem but the solution, as well.



As part of their Multi-City project, the Georgia PRO, GMCF, has incorporated the Bells for Rememberance program in African-American churches throughout their state.

The PROs were able to build trust with the communities and provide assistance in developing infrastructure and skills so that the community could implement the intervention to the intended audiences. In this way the intervention is simply the manifestation of the development of successful community investment. This will lead to future ventures for the improvement of the health of many more Medicare beneficiaries.

Each of the cities have now implemented their own customized interventions. There is considerable enthusiasm within the community based on the assistance they received and the empowerment they enjoyed.

In future issues of **Not Just Once**, im Coan will highlight each of the six Multi-City projects and describe their approaches, their accomplishments, and their difficulties in an effort to demonstrate how a strong community ownership can improve the health of every member of that community. If you would like more information on HCFA's Multi-City Projects, please contact im Coan directly at (410) 786-9168.

The **Not Just Once** Newsletter is published bimonthly to provide timely information to HCFA's mammography partners. For more information, questions, or comments, please contact Ta Budetti or Rachel lugman at HCFA's Chicago Regional Office, (312) 353-1753 or by mail:

Not ust Once Newsletter, 105 W. Adams, 14th Floor, Chicago, Illinois 60603.